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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application No.	10/043,918
		Filing Date	January 11, 2002
		First Named Inventor	Ramesh Pendakur
		Art Unit	2146
		Examiner Name	LI, GUANG W
Total Number of Pages in This Submission	19	Attorney Docket Number	42390P11552

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input checked="" type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> - certificate of First Class US Mail; and copies of 11 of the cited references' - the return receipt postcard </div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Aslam A. Jaffery, Reg. No. 51,841 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	October 31, 2008

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Typed or printed name	Krista Mathieson	Date	October 31, 2008
Signature		Date	October 31, 2008

Based on PTO/SB/21 (10-07) as modified by Blakely, Solokoff, Taylor & Zafman (wtr) 10/05/2007.
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FEE TRANSMITTAL for FY 2007

Patent fees are subject to annual revision.

Complete if Known

Application Number	10/043,918
Filing Date	January 11, 2002
First Named Inventor	Ramesh Pendakur
Examiner Name	LI, GUANG W.
Art Unit	2146
Attorney Docket No.	42390P11552

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) **180.00**

METHOD OF PAYMENT (check all that apply)

- Check
 Credit card
 Money Order
 None
 Other (please identify): _____
- Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP
 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- Charge fee(s) indicated below Credit any overpayments
 Charge fee(s) indicated below, except for the filing fee Any concurrent or future reply that requires a petition for extension of time should be treated as incorporating an appropriate petition for extension of time and all required fees should be charged.
 Charge any additional fee(s) or underpayment of fee(s) during the pendency of this application.

FEE CALCULATION

1. EXTRA CLAIM FEES

	Extra Claims	Fee from below	Fee Paid
Total Claims	5	30* = 0	52.00 = \$0.00
Independent Claims	2	5* = 0	220.00 = \$0.00
Multiple Dependent			

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	52	2202	26	Claims in excess of 20
1201	220	2201	110	Independent claims in excess of 3
1203	390	2203	195	Multiple Dependent claim, if not paid
1204	330	2204	165	**Reissue independent claims over original patent
1205	330	2205	165	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (1)				(\$) 0.00

***or number previously paid, if greater, For Reissues, see below*

2. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
2053	130	2053	130	Non-English specification	
1251	130	2251	65	Extension for reply within first month	
1252	490	2252	245	Extension for reply within second month	
1253	1,110	2253	555	Extension for reply within third month	
1254	1,730	2254	865	Extension for reply within fourth month	
1255	2,350	2255	1,175	Extension for reply within fifth month	
1401	540	2401	270	Notice of Appeal	
1402	540	2402	270	Filing a brief in support of an appeal	
1403	1,080	2403	540	Request for oral hearing	
1451	1,510	2451	1,510	Petition to institute a public use proceeding	
1460	130	2460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	180.00
1809	810	1809	405	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	810	2810	405	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify) _____					
SUBTOTAL (2)					(\$) 180.00

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Aslam A. Jaffery	Registration No. (Attorney/Agent)	51,841	Telephone	(303) 740-1980
Signature				Date	10/31/08

Based on PTO/SB/17 (02-07) as modified by Blakely, Sokoloff, Taylor & Zafman (w/r) 02/26/2007.
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